| Interview Summary | 10/766,488 | ISHIBASHI ET AL. | |
|--|---------------------------------|--------------------|-------|
| | Examiner | Art Unit | |
| | Hemang Sanghavi | 2874 | |
| All participants (applicant, applicant's representative, PTO personnel): | | | |
| (1) <u>Hemang Sanghavi</u> . | (3) <u>Michael A. Sartori</u> . | | |
| Kavita Lepping. (4) | | | |
| Date of Interview: <u>09/26/2006</u> . | | | |
| Type: a)☐ Telephonic b)☐ Video Conference c)☑ Personal [copy given to: 1)☐ applicant 2)☐ applicant's representative] | | | |
| Exhibit shown or demonstration conducted: d)☐ Yes e)☒ No. If Yes, brief description: | | | |
| Claim(s) discussed: None. | | | |
| Identification of prior art discussed: None. | | | |
| Agreement with respect to the claims f) was reached. g) was not reached. h) № N/A. | | | |
| reached, or any other comments: Applicant presented brief summary of prosecution of the reissue case. Examiner pointed out the new matter in the claims (no support for a single frame holding the circuit board). Examiner also pointed out possible restriction to claims belonging to a cap. (A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.) THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER OF ONE MONTH OR THIRTY DAYS FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet. | | | |
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| Examiner Note: You must sign this form unless it is an Attachment to a signed Office action. | Examiner's si | gnature, if requir | ed ed |

Application No.

Applicant(s)